Professional Licensing Agency 402 West Washington Street Room W072 Indianapolis, IN 46204



Michael R. Pence Governor of Indiana Deborah J. Frye PLA Executive Director

Behavioral Health and Human Services Renewal

Your behavioral health and human services license in the state of Indiana expires on April 1, 2016. You may renew your license online at www.pla.in.gov. To renew by mail, please complete this document in its entirety and submit it with the renewal fee of \$50.00 to the office address above. Make check or money order payable to 'Indiana Professional Licensing Agency'. If this document is postmarked after April 1, 2016 you must include a \$50 late fee. If you answer 'Yes' to questions 1-5 below, send a detailed statement regarding the response with this form.

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	LICENSEE INFORMATION: Update addre Enter Licensee Name	Enter License N		Expiration Date		enewal F	
Sti	reet Address			<u>I</u>			
City		State		Zip Code			
Phone Number		Email Address	Email Address				
		QUESTIONS					
1.	1. Since you last renewed, has any healthcare license, certificate, registration, or permit you hold or have held been disciplined or are formal charges pending?				have	YES	NO
2.	2. Since you last renewed, have you been denied a license, certificate, registration, or permit in any state?					YES	NO
3. Since you last renewed, and except for minor violations of traffic laws resulting in fines and arrests or convictions that have been expunged by a court, have you been arrested, entered into a diversion agreement, been convicted of, pled guilty to, or pled nolo contendere to any offense, misdemeanor, or felony in any state?					YES	NO	
4.	4. Since you last renewed, have you had a malpractice judgment against you or settled a malpractice action?				Э	YES	NO
5. Since you last renewed, have you been denied staff membership or privileges in any hospital or health care facility or, have staff membership or privileges been revoked, suspended, or subjected to any restriction, probation, or other type of discipline or limitations?					YES	NO	
6.	practice in retired status. Associate licenses do not have retired status.			YES	NO		
		LICENSEE AFFIRMA	TION				
red	ereby swear or affirm under the penalties of p quirements for renewal, understand the Beha d have answered the questions true to the be	vioral Health and Hu	man Service				:S
Signature of Licensee			Date (mont	h, day, year)			

Visit www.pla.in.gov for additional information regarding your license.

If you have any questions for the Behavioral Health and Human Services Licensing Board please email <u>pla8@pla.in.gov</u> or call 317-234-2054.

FOR OFFICE USE ONLY					
Renewal Fee	Receipt No.	Date			